



STATE BOARD OF MEDIATION

TALLY OF BALLOTS

911 Dispatchers for Jackson County Sheriff

Public Case No.: R 2019-025

Date of Election: December 7, 2018

Election to Determine

Exclusive Bargaining Representative

The undersigned agent of the State Board of Mediation certifies that the results of the tabulation of ballots cast in the election held in the above case, and concluded on the date indicated above, were as follows:

1. Number of eligible voters _____ 13
2. Void ballots _____
3. Votes cast for **CWA Local 6360** _____ 12
4. Votes cast for _____
5. Votes cast for _____
6. Votes cast against participating labor organizations _____
7. Valid votes counted (total 3, 4, 5 and 6) _____ 12
8. Challenged ballots _____ 0
9. Valid votes counted, plus challenged ballots (total 7 and 8) _____ 12
10. Challenged are sufficient to affect the results of the election _____
11. Sustained challenges (ineligible voters) _____
12. Challenged ballots cast for **CWA Local 6360** _____ 0
13. Challenged ballots cast against participating labor organization _____
14. Revised total of ballots cast for participating labor organization _____
15. Revised total of ballots cast against participating labor organization _____
16. Revised total of eligible voters _____
17. A majority of valid votes counted ~~has~~ **(not)** been cast for: _____

CWA Local 6360

For the State Board of Mediation


Authorized Officer

The undersigned acted as authorized observers in the counting and tabulating of ballots indicated above. We hereby certify that the counting and tabulating were fairly and accurately done; that the secrecy of the ballots was maintained; and that the results were as indicated above.

FOR _____

FOR _____

FOR _____